

the Hamilton General Hospital and the Mountain Sanatorium, Past President of the Hamilton Academy of Medicine and a leader in all good works.

Although his mercurial temperament led to an estrangement in later years with the bodies of organized medicine to which he had contributed so greatly, his contemporaries will remember him with respect and succeeding generations will continue to hear his name mentioned as one of our legendary figures.

PROVINCIAL NEWS

BRITISH COLUMBIA

The Osler Dinner of the Vancouver Medical Association was held in the Hotel Vancouver on March 6. This is an annual function and in many ways is the most important event of the year's work of the Association. It is given in commemoration of Sir William Osler and this is the 34th Osler Dinner given by the Vancouver Medical Association.

Last year Dr. D. E. H. Williams gave a memorable address on the Maimonidean Code; this year Dr. R. J. Nielson, Assistant Professor of Surgery at the University of British Columbia Medical School, was the speaker. His subject was "The Professor"—who, it turned out, was Dr. Halsted of Johns Hopkins fame. Dr. Nielson gave an absorbingly interesting account of this great man, with a personal touch inspired by his own knowledge of the School, where he did postgraduate work himself.

Another most important part of the Osler Dinner is the bestowing on carefully chosen candidates of the Degree of Prince of Good Fellows—the high-water mark of appreciation of merit, shown by the Association.

The two men chosen this year were Dr. Frank A. Turnbull and Dr. Neil A. Gilchrist, both men fully worthy of the honour.

A most important announcement was made recently by the Hon. Eric Martin, B.C. Minister of Health. He stated that the B.C. Hospital Insurance Services coverage will be extended to cover "chronic" patients in about a year's time. He said that B.C. communities will be urged to build hospitals for chronic conditions as soon as possible—half the cost to be paid by the government with federal grants. Full details are not yet obtainable, but this is undoubtedly a definite step in the right direction, and should relieve acute treatment hospitals to a great degree. Mr. Martin estimates that 1,400 beds will be needed throughout the province. Many of us feel that he has underestimated the need, but time will show—and the government feels that it has to move slowly and carefully till it sees its way clearly.

At the Annual Meeting of the B.C. Division of the Canadian Cancer Society, Dr. G. F. Strong, president, reported on the research work of the Society during the past year.

The Research Fund provided a total of more than \$23,000 for three new research projects, a recording spectrophotometer for the University of B.C.'s biochemistry department, and an isotope laboratory at the B.C. Medical Research Institute. The B.C. Division gave more than \$40,000 to the work of the National Cancer Institute of Canada, which co-ordinates all cancer research in Canada.

Dr. Strong dwelt on the absolute necessity for continual research as the only hope for solution of the cancer problem.

Mr. and Mrs. P. A. Woodward of Vancouver have given a fellowship, known as the Foundation Fellowship in Cancer Research, to the University of British Columbia. The fellowship has a value of \$5,000 annually, and will be devoted to further cancer research in the Biochemistry Department of the Faculty of Medicine.

The sixth annual Medical Ball of the University of British Columbia was held on March 22, at the Hotel Vancouver, under the distinguished patronage of Lieutenant-Governor Frank Mackenzie Ross and Mrs. Ross.

Other patrons included the Hon. Eric Martin, Minister of Health, and Mrs. Martin; the Hon. Ray Williston, Minister of Education, and Mrs. Williston; Chancellor Sherwood Lett and Mrs. Lett; President N. A. M. Mackenzie and Mrs. Mackenzie, and many others.

An influenza epidemic is at present very active in B.C. While not of very great severity, it has caused considerable disruption of office and business activities, and schools are suffering considerable depletion.

Hospitals in British Columbia are faced with considerable deficits this year—amounting in all to some \$750,000. An attempt is to be made to induce the Government to come to the rescue.

The students of the University of British Columbia have recently put on a drive to obtain donations of blood and the various faculties have been in close competition, the faculty of forestry being in the lead with 109% of its quota; the nursing department came next with 103%.

In all 2,540 students offered blood and 2,151 of these were accepted for donations, 2,151 pints being collected in eight days.

The B.C. Division of the Canadian Arthritis and Rheumatism Society held its annual meeting lately; the great need for increased long-term inpatient treatment was emphasized, as was the need for a School of Physiotherapy. An account was given of the mobile units and clinics throughout the province. These cost \$177,983 out of a total budget of \$312,143. Mr. Arthur J. Andrews was named president of the society, succeeding Mr. Brenton S. Brown. J. H. MACDERMOT

ALBERTA

The second Annual Scientific Session of the Alberta Chapter of the College of General Practice was held in Red Deer on March 8 and 9. Blowing snow made travel hazardous, but nevertheless the attendance was gratifying and reflects both the satisfaction with last year's program and the general interest in the College.

The scientific program, covering a large area in the field of medical practice, was put on by Calgary the first day and Edmonton on the second. The comments of "practical"—"just what we wanted"—made a happy accolade for the committee.

Dr. J. Howard Black, Vancouver, President of the Canadian College of General Practice, was the guest speaker at one luncheon and spoke on the present and probable future status of the general practitioner. The ladies were not neglected in the social arrangements, and as well as enjoying their own program were feted at a dinner and dance.

The officers of the Alberta Chapter of the College are: President, Dr. W. W. Eadie, Edmonton; Secretary, Dr. R. F. Taylor, Edmonton; Treasurer, Dr. J. Ibberston, Calgary.

Since January 1 of this year, most hospitals in Alberta have offered their services under the special hospital services plan of the Provincial Government. This gives

standard ward accommodation to all patients on a per diem rate which includes laboratory and x-ray services, operating room facilities and practically all special drugs with no additional charges. The rates vary with the size of the hospital and the quality of services offered. For non-supporters in Class A hospitals the rate is \$14.25 a day and in Class D it drops down to \$10.10. The majority of hospitals now operate under the Municipal Hospitals Act, under which the local authority either supplies hospitalization or contracts for it for the benefit of residents. All property holders in such areas, which now include Calgary and Edmonton, are automatically entitled to the benefits of this scheme, while residents who wish to can purchase hospital supporters' tickets for from \$10 to \$15, depending on the class of hospital in the district. The per diem charge to the patient varies from \$2.00 a day in the case of Class A hospital to \$1.50 in Class D. If a hospital supporter is away from home and requires emergency hospitalization for accident or sudden illness, the benefits on an established scale will apply anywhere. The same applies for referrals by the patient's physician.

It is expected that the rate of utilization will increase considerably, though in the cases of hospitals that have been operating under the scheme for two years this has not been excessive. Since Alberta is the second highest province from the point of view of general hospital bed supply, the situation should not be serious. Part of the control is due to the fact that Alberta stands second lowest in length of stay in hospital.

At present the scheme is restricted to treatment services for inpatients; despite the favourable per capita bed situation it is difficult to hospitalize patients for straight investigation.

One problem that arises out of the special services regulations is the increased load that may be thrown on the pathologists and radiologists. Increased utilization of these services, which at present are recognized as "hospital services", throws an increased burden on the members of these branches of the profession without making adequate provision for compensation for these services. This aspect of the situation is at present under study by the Council of the Provincial Division of the C.M.A.

W. B. PARSONS

MANITOBA

At a quarterly meeting of the Royal College of Physicians of Edinburgh on February 7, 1956, Dr. M. G. Williams, M.D. Manitoba, was elected a member of the College.

QUEBEC

The Osler Society of McGill University held its 35th anniversary dinner in the Ritz-Carlton Hotel on February 28. Special tribute at this anniversary dinner was paid to Dr. W. W. Francis, who has been custodian of the Osler Library at McGill for 27 years. Tributes to Dr. Francis's scholarly qualities and friendliness were much in evidence. In addition, he was presented with a portrait of himself by the Montreal artist Audrey MacDermot, and a leather-bound copy of a book, "W. W. Francis: Tributes from His Friends". This volume, published as a limited edition by the Osler Society, contains letters and essays from some 40 of Dr. Francis's friends in Canada, the U.S.A. and the U.K.

The guest speaker of the evening was Dr. John F. Fulton, Sterling professor of the history of medicine at Yale University. He has been a long-time friend of Dr. Francis and in his talk emphasized the unceasing efforts of Dr. Francis in preserving the memory of Sir William Osler. He was principal editor of the 785-page catalogue of the Osler collection of some 8,000 books relating to the history of science and medicine.

Dr. F. Cyril James, principal and vice-chancellor of McGill, also spoke in tribute of Dr. Francis. Dr. Harry

C. Ballon, honorary president of the Society, introduced Dr. Fulton, who was thanked by D. G. Lawrence, chairman of the banquet committee.

Under the sponsorship of the Montreal Mechanic's Institute, our Division has conducted four medical forums during this past winter. The chairman for all the forums was Dr. E. F. Crutchlow of the Public Relations Committee of the Division. Three of these were most successful as far as attendance is concerned; only one, the first, held on November 23, proved somewhat disappointing. The fourth and last was held on March 7, and concerned rheumatism. Speakers were Dr. Louis Johnson and Dr. John Martin, directors of the arthritis clinics at the Royal Victoria and the Montreal General Hospitals respectively. Both speakers emphasized that the basic treatment for rheumatoid arthritis is rest plus controlled activity.

McGill University has been willed \$50,000 by the late Dr. Burton E. Goodwin of Amherst, N.S., who graduated in medicine here in 1908. In terms of the will this amount, which is for general purposes of the university, is one-third of the residue of the estate of our late colleague.

The Montreal Obstetrical and Gynaecological Society has been keeping records of deliveries, through one of its committees, in the Royal Victoria, Montreal General, St. Mary's, Jewish General, Reddy Memorial, Catherine Booth and Queen Elizabeth Hospitals for the past five years. Dr. Douglas Sparling, chairman of this committee, advises that last year (1955) these seven Montreal hospitals established a record since these figures have been compiled. Only one death due to pregnancy occurred in 12,129 deliveries. Actually, three deaths in the delivery category were reported, but one resulted from an infection coincidental to pregnancy and another was caused by association of anaemia and pregnancy complicated by infection. The one death was believed due to the fact that the mother did not seek and get adequate pre-natal care. The excellent record is believed to result from good pre-natal care and from care in hospital where anaesthesia administration is good and facilities, such as blood transfusion and antibiotics to apply quickly in case of an emergency, are available.

St. Jean de Dieu Hospital in Montreal has established a closer link with Laval University in the appointment of Dr. Lucien LaRue as consulting physician. This appointment was announced by Dr. Gaston Loignon, medical superintendent of the hospital. St. Jean de Dieu is probably one of the largest mental hospitals on this continent. It houses some 6,000 patients in its large establishment on the east side of Montreal island.

Dr. LaRue is chairman of the Department of Psychiatry at Laval University and medical director of Hotel Dieu Hospital in Quebec City. He is also medical superintendent of St. Michel Archange Hospital in Quebec City and of the psychiatric hospitals of Roberval, Baie St. Paul and St. Ferdinand in this province. His outstanding position in the public health field in the province is shown in his appointment last year as a member of the Quebec Hospital Commission.

The Cancer Research Society, Inc., in Montreal now helps to maintain seven beds for indigent cancer patients in the city hospitals. The latest addition is a bed at the Montreal Neurological Institute, for which a cheque for \$3,000 was recently presented to Dr. William V. Cone, neurosurgeon-in-chief at the hospital, by Mrs. Ben Sternthal, president of the Society.

The group life and group sickness and accident insurance plans that have been made available to members through our Division during the past year have

now been extended to medical men in all five eastern provinces of Canada. This will make available to all our colleagues in the five provinces insurance in amounts and at a cost similar to those which have long been available to executives in industry. Our Division is also looking into the possibility of a group automobile fleet carrier for members.

On March 16, the clinical evening of the Montreal Medico-Chirurgical Society was held at Queen Mary Veterans Hospital. As we have come to expect, the staff of this hospital put on an excellent program. Some 54 exhibits were shown which included charts, data, and equipment. The emphasis this year seemed to be directed towards presentation of interesting and instructive case reports. Although it was a miserable and stormy evening, a surprising number attended.

This represented the last clinical evening arranged by the Society for this season. Only one more general meeting will take place. The program committee of the Society is to be congratulated on the excellent quality of meetings held during the season.

A. H. NEUFELD

CANADIAN ARMED SERVICES

Surgeon Commander R. A. G. Lane, R.C.N., was recently appointed to H.M.C.S. *Stadacona*, Halifax, for duty in the Naval Hospital after completing 20 months' service as Principal Medical Officer of the Aircraft Carrier H.M.C.S. *Magnificent*. He was replaced in H.M.C.S. *Magnificent* by Surgeon Lieutenant Commander D. B. Maunsell, R.C.N., who had previously been serving in the cruiser H.M.C.S. *Quebec* as Principal Medical Officer.

Brigadier Kenneth A. Hunter, O.B.E., C.D., Q.H.P., M.D., has been appointed a member and co-ordinator of the Canadian Forces Medical Council of which Dr. J. A. MacFarlane, Dean of Medicine, University of Toronto, is chairman. In his new position Brigadier Hunter will be chairman of the Inter-Service Medical Committee and will be responsible for the administrative function of the Canadian Forces Medical Council. In his capacity as co-ordinator he will be on the staff of General Charles Foulkes, chairman, Chiefs of Staff.

Born in London, Ontario, August 28, 1904, Brigadier Hunter has had a distinguished military career. He served in the ranks and as an officer in the Canadian Machine Gun Corps, 1922-30, at which time, having graduated from the University of Western Ontario, he was appointed to the Royal Canadian Army Medical Corps (Permanent Force). By 1937 he was District Medical Officer at Toronto and became Principal Medical Officer, Western Air Command, in 1938.

Throughout World War II he had extensive service overseas; in 1940 he was Principal Medical Officer, Royal Canadian Air Force, in London, England. Between 1941 and 1946 he held various senior command and staff appointments in the R.C.A.M.C. overseas, with operational service at Dieppe, in Sicily, Italy, Northwest Europe and Germany. For distinguished conduct at Dieppe, in August 1942, he was mentioned in despatches.

Since World War II Brigadier Hunter has held appointments as Command Medical Officer, Central Command; Deputy Director General of Medical Services (Army); and Director General of Medical Services (Army). He attended National Defence College 1945-49.

He was appointed Officer of the Most Excellent Order of the British Empire 1944; Commander of The Order of St. John; and Honorary Physician to Her Majesty Queen Elizabeth II in 1953.

Colonel Stanley G. U. Shier, O.B.E., C.D., M.D., of Toronto, was promoted to the rank of Brigadier and appointed Director General of Medical Services (Army)

on March 15. Brigadier Shier, who has been Command Medical Officer, Headquarters, Central Command, Oakville, Ontario, succeeds Brigadier K. A. Hunter, O.B.E., C.D., Q.H.P., M.D.

The new Director General of Medical Services, who was born in York County, Ontario, in 1903, graduated in medicine from the University of Toronto in 1930 and was commissioned to the Permanent Force of the Royal Canadian Army Medical Corps in 1931. Before the Second World War he served as a medical officer with the Royal Canadian Navy, Canadian Army, and Royal Canadian Air Force.

During the war he held senior staff appointments at Headquarters, 2nd and 3rd Canadian Infantry Divisions, and commanded No. 10 Canadian Field Ambulance.

Upon his return to Canada he served at Army Headquarters, Ottawa, until November 1947, when he was appointed Command Medical Officer, Headquarters, Quebec Command, Montreal. He held this appointment until May 1951 when he was posted to Oakville as Command Medical Officer, Central Command.

Brigadier Shier was appointed as Officer of the Most Excellent Order of the British Empire in 1945, and Officer Brother of The Order of St. John in 1947.

Brigadier J. N. B. Crawford, M.B.E., E.D., is retiring from the Canadian Army and will assume the appointment of Director General of Treatment Services, Department of Veterans Affairs.

A course in Civil Aviation Medicine was conducted at the Royal Canadian Air Force Institute of Aviation Medicine, Toronto, from March 5 to March 10, for 25 Department of Transport appointed Civil Aviation Medical Examiners and 5 Department of National Health and Welfare appointed District Medical Officers. Some of the lectures were given by Group Captain D. G. M. Nelson, Commanding Officer, Institute of Aviation Medicine, and other R.C.A.F. members.

BOOK REVIEWS

THE DISPENSATORY OF THE UNITED STATES OF AMERICA. Arthur Osol, Professor of Chemistry, Philadelphia College of Pharmacy and Science; George E. Farrar, Jr., Medical Director, Wyeth Laboratories, Inc.; and others. 2,193 pp. 25th ed. J. B. Lippincott Company, Philadelphia and Montreal, 1955.

The 25th edition of this monumental work appears after a lapse of eight years and will receive a warm welcome from all those who require a ready reference book of drugs. In this edition, because of the fantastic developments in therapy in the post-war era, the book has undergone more change than ever before in its history. No less than 500 new drugs are described, and for the first time the International Pharmacopoeia takes its place beside the U.S. Pharmacopoeia, the National Formulary and the British Pharmacopoeia, as a source for the cataloguing of medicaments. The former Part Three of the Dispensatory, which used to deal with tests and reagents, has been deleted, and the section on "Veterinary Uses and Doses of Drugs" has been considerably enlarged. Not only are individual drugs described in alphabetical order, but there now are a series of general survey articles on certain important classes of drugs, such as the anticoagulants, antihistamines and ganglion-blocking agents. As before, the literature has been thoroughly combed, and references right up to 1955 are included. The details of dosage have been greatly expanded to include variations in different diseases or in different methods of administration. One can only remain amazed at the amount of detailed work which the contributors have had to do in so completely re-organizing this standard work of reference.